MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO.
10/552706
APPLICANT(S)

FILING DATE

AFTER

2 MAMENDMENT

IND. DEP.

AFTER

I"AMENDMENT

DEP.

IND.

\mathbf{CL}		

AS FILI		IND.	TER TOMENT DEP.	AF 2 ^M AM IND.	TER ENDMENT DEP.	5 5 5 5 5 6 6	8 9 0 1 2	IND.	DEI
			DEP.			5 5 5 5 5 6 6	52 53 54 55 66 77 8 8 9 0	IND.	DEI
						5 5 5 5 5 6 6	52 53 54 55 66 77 8 8 9 0		
						5 5 5 5 5 6 6	52 53 54 55 66 77 8 8 9 0		
						5 5 5 5 5 6 6	53 54 55 66 77 8 9 0		
						5 5 5 5 6 6	55 66 7 8 9 0 1		
						5 5 5 5 6 6	66 77 8 9 0 1		
						5 5 5 6 6	7 8 9 0 1 2		
						5 5 6	8 9 0 1 2		
						5 6 6	9 0 1 2		
						$\frac{6}{6}$	0 1 2		
						6	1 2		-
							2		·
				-		6.	3	·	
						64			<u> </u>
						65	5		
						. 66			
						67			
						68			
	_ 1					69			
						70 71	' 	-	
						72			
						73			
				·		74			
	- 	-				75			
-1						76			
						77			
						78	-		
						79 80	<u> </u>		
					-	81			
	-					82	-		
	-					83			
	-					84			
	1					, 85			
	1				·	86)
				_			-		
							-		
	-						-		
							-	 	
	-1		-				-		
						94	1-	_	
	1	-				95			_
	 	-}				. 96			
, , ,	1								
	1	1-		 			 		
		_					<u> </u>		
1				`	_	100	 		
*	 	_J ~	/		₩ .	TOTALIND	1	_]. 1	
DELENO	 	CSI SEEM	100		1.	TOTAL DEP		4	
THE PERSON NAMED IN COLUMN		335	類			TOTAL			
	4	4		4 4			88 89 90 91 91 92 93 94 95 96 97 98 99 100 TOTAL IND	88 89 90 91 92 93 94 95 96 97 98 99 100 TOTAL IND.	88 89 90 91 92 93 94 95 96 97 98 99 100 TOTALIND.

U.S. DEPARTMENT of COMMERCE Patent and Tradenack Office

1